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Bib Data Sheet

CONFIRMATION NO. 3037

<b>SERIAL NUMBER</b> 10/632,878	<b>FILING OR 371(c) DATE</b> 08/01/2003 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1654	<b>ATTORNEY DOCKET NO.</b>
<b>APPLICANTS</b> Cohava Gelber, Hartsdale, NY; Kathleen Rousseau, Ossining, NY;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/427,388 11/18/2002 and claims benefit of 60/406,525 08/28/2002 and claims benefit of 60/400,159 08/01/2002 and claims benefit of 60/489,191 07/22/2003				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 11/14/2003				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 10	<b>TOTAL CLAIMS</b> 37
<b>INDEPENDENT CLAIMS</b> 2				
<b>ADDRESS</b> MANKIND CORPORATION 1 CASPER STREET DANBURY, CT06810				
<b>TITLE</b> Cell transport compositions and uses thereof				
<b>FILING FEE RECEIVED</b> 593	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	